PTO/SB/01 (12-97)

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DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION

(37 CFR 1.63)

□ Declaration Submitted with Initial Filing

☐ Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)

Attorney Docket Number		PK-9857			
First Named Inventor		Okano			
COMPLI	ETE II	F KNOWN			
Application Number		09 /700,602			
Filing Date	15-	Nov-2000			
Group Art Unit	То	be assigned			
Examiner Name	То	oe assigned			

` <u> </u>									
As a below named inventor, I hereby declare that:									
My residence, post office address, and citizenship are as stated below next to my name.									
I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:									
Chromatographic Packing Having Novel Charactersitics and Method for Separating Substances by Using the Same									
the specification of which (Title of the Invention) is attached hereto									
OR was filed on (MM/D	D/YYY) 11/15/2000) as United	d States Applicat	tion Number or I	PCT International				
Application Number 0	9/700,602 and wa	as amended on (MM/DD/Y)	YYY)		(if applicable).				
amended by any amendme	eviewed and understand the output specifically referred to about the list of t	ove.			claims, as				
•									
I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.									
Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Co	opy Attached?				
Number(s)		(MINIOD/1111)		IEG	- RO				
140722/1998	JP	05/22/1998							
Additional foreign applic	ation numbers are listed on a	supplemental priority data	sheet PTO/SB/0	02B attached he	reto:				
I hereby claim the benefit t	under 35 U.S.C. 119(e) of an	y United States provisional	application(s) lis	ted below.					
Application Number	(s) Filing Date	e (MM/DD/YYYY)		•					
			numb	onal provision ers are listed o emental priorit	on a				
			PTO/S	SB/02B attach	ed hereto.				

[Page 1 of 2]
Burden Hour Statement: This form is estimated to take 0.4 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

٠ (PTO/SB/01 (12-97)
Please type a plus sign (+) inside this box -2 [+]	Approved for use through 9/30/00. OMB 0651-0032
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DECLARATION — Utility of Design Fatent Application									
I hereby claim the benefit under 35 U.S.C. 120 of any United States application(s), or 365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of 35 U.S.C. 112, I acknowledge the duty to disclose information which is material to patentiability as defined in 37 CPR 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.									
U.S. Parent Application or PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number <i>(if applicable)</i>							
PCT/JP99/02698	05/24/1999								
Additional U.S. or PCT international application numbers are listed or									

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Additional U.S. or PCT international application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.									
As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to transdam Arademark Office connected therewith: Customer Number 22840									
	Registration Name Registration								
Name Number				Name Number					
Additional registere	d practitioner(s) named o	on supplementa	Registered F	ractitioner	nformation sh	eet PTO/S	SB/02C	attached here	eto.
Direct all correspond		ner Number Code Label	2284	0	OR	Со	rrespo	ondence add	ress below
Name									
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Country		Telepho	ne			Fax			
believed to be true; an punishable by fine or i	I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.								
Name of Sole or	Name of Sole or First Inventor:								
Given Na	Given Name (first and middle [if any]) Family Name or Surname								
Teruo		Okano							
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Additional inventors are being named on the 2

ZIP

supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto

sign (+) inside this box

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ADDITIONAL INVENTOR(S) Supplemental Sheet Page 1 of 2

		_									
Name of Additional Joint Inventor, if any:					A petition has been filed for this unsigned inventor						
Given Name (first and middle [if any])				Family Name or Surname							
<u>Akihik</u> o				K	ikuch	<u>i</u>					
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City		State			ZIP		Country				
Name of Addition	nal Joint Inventor, if any	<i>y</i> :			A petitio	n has been file	d for this	s unsign	ed inv	entor	
Given Na	me (first and middle [if any])					Family Nar	ne or S	umame			
Yasuhisa	a a			Sakurai						·	
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City		State			ZIP		Coniu	itry			
Name of Addition	nal Joint Inventor, if an	y:			A petitio	on has been file	d for th	is unsigr	ned inv	entor	
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Hideko	Hideko			Kanazawa							
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City		State			ZIP	vany depending u		ountry			

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DECLARATION

ADDITIONAL INVENTOR(S) Supplemental Sheet Page 2 of 2

									-	
Name of Addition	itional Joint Inventor, if any:									
Given Name (first and middle [if any])					Family Name or Sumame					
Yoshikazu	ZU				<u>/latsu</u>	ushima _				
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Post Office Address	Kanagawa 2	10-0	022	Jap	oan					
City		State			ZIP	C	Country			
Name of Addition	nal Joint Inventor, if an	y:			A petitio	on has been filed	for this	s unsign	ed inv	entor
Given Nar	me (first and middle [if any])				Family Nam	e or Si	umame		
Inventor's Signature								Dat	te	
Residence: City		State			Country			Citizer	ıship	
Post Office Address										
Post Office Address										
City		State			ZIP		Count	гу		
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Given Na	me (first and middle [if any])				Family Nam	ne or Si	umame		
		•								
Inventor's Signature	,							Dat	te	
Residence: City		State			Country			Citizer	nship	
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City		State			7IP		Co	ountry		

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